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PTO/SB/05 (03-01)
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	A261-USA
	First Inventor	Nelson
	Title	Magnet Control System For Battery Powered Living Tissue ...
	Express Mail Label No.	EL 426 337 326 US


APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 57]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[Total Sheets 15]</small>	ACCOMPANYING APPLICATION PARTS
5. Oath or Declaration <small>[Total Pages 2]</small> <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small>	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner _____ Group / Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label  or <input type="checkbox"/> Correspondence address below					
<small>(Insert Customer No. or Attach bar code label here)</small>					
Name	ALFRED E. MANN FOUNDATION FOR SCIENTIFIC RESEARCH				
Address	P.O. Box 905				
City	Santa Clarita	State	CA	Zip Code	91380-9005
Country	U.S.A.	Telephone	(661) 775-3995	Fax	(661) 775-1595

Name (Print/Type)	Lee Jay Mandell	Registration No. (Attorney/Agent)	37,176
Signature		Date	2/21/02

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

<h1 style="margin: 0;">FEE TRANSMITTAL for FY 2002</h1> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision.</p>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		Filing Date	
		First Named Inventor	
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT		\$1,560.00	
		Attorney Docket No.	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																																							
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0692 Deposit Account Name: Alfred E. Mann Foundation The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.	<h3>3. 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104	280	204	140	Multiple dependent claim, if not paid																																																																																																																																																																																																																																																																																																																				
109	84	209	42	** Reissue independent claims over original patent																																																																																																																																																																																																																																																																																																																				
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Lee Jay Mandell	Registration No. (Attorney/Agent)	37,176
Signature	<i>Lee Jay Mandell</i>	Telephone	(661) 775-3995
		Date	2-21-02

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Applicant(s): Nelson, et al.

Docket No.

A261-USA

Serial No.

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Filing Date

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Examiner

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Group Art Unit

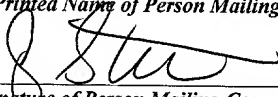
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Invention: **MAGNET CONTROL SYSTEM FOR BATTERY POWERED LIVING TISSUE STIMULATORS**

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PATENT APPLICATION*(Identify type of correspondence)*

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